

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | E.H.     | 10     | 08/09-01 |
| O.I.P.E. CLASSIFIER       |          | 535    | 7/1/01   |
| FORMALITY REVIEW          | sd       | 34114  | 11/28/01 |
| RESPONSE FORMALITY REVIEW | CC       |        | 11-02-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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102-7  
 09/28/01  
 851  
 11/02/01